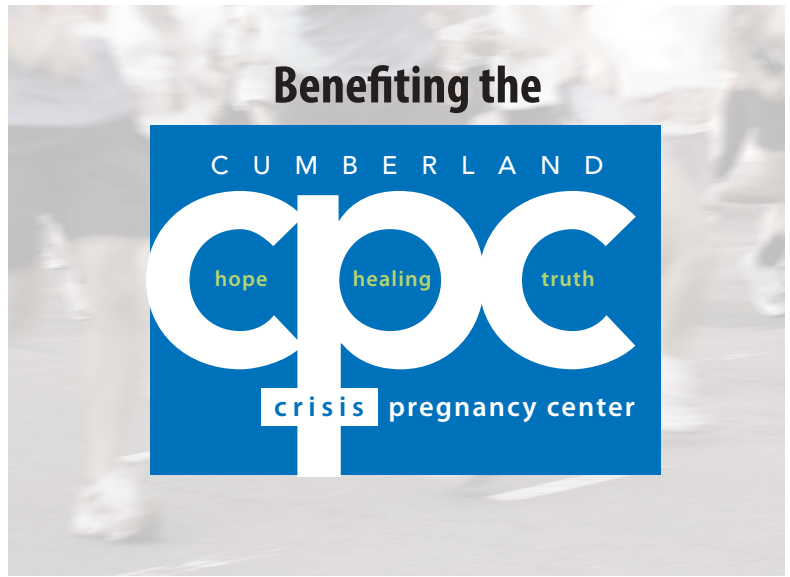


THE MEMORIAL DAY



15K | 5K | 1M



MEMORIAL DAY MAY 28, 2018

Drakes Creek Park, Hendersonville, TN Start and Finish Lines in the Park

STARTING TIMES: 7:00am 15K RUN 8:00am 1 Mile Fun Run/Walk
7:30am 5K RUN

Event: 15K _____ 5K _____ 1 Mile Fun Run/Walk _____

Name _____

Age _____ Sex: M _____ F _____

Address _____

City _____

State/Prov. _____ Zip/Postal Code _____

Phone (+area code) _____ E-Mail Address _____

Unisex Adult T-Shirts: S _____ M _____ L _____ XL _____ XXL _____ (only pre-registered by May 1st guaranteed)

Youth T-Shirts: S _____ M _____ L _____ (no XL or XXL on kid sizes)

ONLINE REGISTRATION:
www.thememorialdayclassic.com

REGISTER VIA MAIL:
Cumberland Crisis Pregnancy Center
P.O. Box 1037
Hendersonville, TN 37077

REGISTER AT THE HENDERSONVILLE YMCA BY MAY 25TH:
102 Bluegrass Commons Blvd.
Hendersonville, TN
615-826-9622

REGISTER ON RACE DAY!
It's never too late to register!
Registration opens at 5:45 am

RACE PACKET PICKUP:
For your convenience, if your pre-registration is received by Thursday, May 24th at 5 pm, you may pick up your race packet Friday, May 25th from 5-7 pm or Saturday, May 26th from 10 am-Noon at the Hendersonville YMCA.

Early Registration

Adult: 15k \$35, 5k \$25
1 mile fun race/walk - \$20
Child (12 & under) \$20

May 1st

Adult: 15k \$40, 5k \$30
1 mile fun race/walk - \$25
Child (12 & under) \$25

Race Day

Adult: 15k \$45, 5k - \$35
1 mile fun race/walk - \$25
Child (12 & under) \$25

Additional Donation for CCPC
MAKE CHECK PAYABLE TO:

Cumberland Crisis Pregnancy Center (CCPC)

P.O. Box 1037, Hendersonville, TN 37077

Additional donations are welcome and all donations are tax deductible according to IRS regulations.

You can also access our online pledge program at www.thememorialdayclassic.com.

Signature _____ Date _____

WAIVER: I, by entry into this event, release for myself and anyone on my behalf The Cumberland Crisis Pregnancy Center, the Government of Sumner County and Hendersonville, TN, and all sponsors and anyone or other organization involved in the event, their employees, agents or representative, from all claims or liabilities of any kind of nature whatsoever arising out of my voluntary participation. I know that running is potentially dangerous and I assume all risks.

OFFICIAL USE ONLY

Check# _____ Amount \$ _____

Cash _____ Amount \$ _____

Bib# _____



The Memorial Day Classic Pledge Form

Participant's Name _____
 Address _____
 City _____
 State _____ Zip _____
 E-Mail _____
 Participant's Phone # _____
 Church or Group _____

- * Please Print All Information and Indicate The Total Pledge Amount
- * Please use a separate form for additional sponsors as needed
- * You can also access our online pledge program at www.thememorialdayclassic.com

Will you please help the Cumberland Crisis Pregnancy Center by getting sponsors?

The Cumberland Crisis Pregnancy Center will take care of all collections therefore you do not have to collect money. If sponsors want to give you the money, please collect checks only, mark "PAID" next to their names, and turn the checks in with your Sponsor Pledge Form the day of the event. Checks need to be made payable to Cumberland Crisis Pregnancy Center (CCPC) and are tax deductible according to IRS regulations. Donations are for participation, not laps completed. Please be sure your sponsors' names and addresses are accurate and complete to save the valuable time of our volunteers. ZIP CODES ARE VITAL! Please be sure YOUR NAME is on the Walk Pledge Form and that you have signed the WAIVER. Turn in your Pledge Form when you check in on Event Day.

First Name _____ Last Name _____ Address _____ City _____ State _____ Zip _____ Phone Number _____ E-Mail _____ Pledge Amount \$25 \$30 \$50 \$100 \$ _____ Other	First Name _____ Last Name _____ Address _____ City _____ State _____ Zip _____ Phone Number _____ E-Mail _____ Pledge Amount \$25 \$30 \$50 \$100 \$ _____ Other
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TOTAL PLEDGE AMOUNT \$ _____

** Donations are tax deductible according to IRS regulations*